FOR INSTRUCTIONS, SEE BACK OF FORM	The second of th	FORM	STATEMENT
CHECK ONE:		DR-1	OF
☐ This is an <b>initial*</b> Statement of Organization☐ This is an <b>amended*</b> Statement of Organization	M 3 22.08 Reset Form	(Rev. 01/2006)	ORGANIZATION
*An initial Statement of Organization must be filed within 10 down at the	20 20	For Office Use	L
		Comm. #	
		Indexed Audited	
committee that exceeds \$750 in activity for another office shall file within DR-1 disclosing information concerning the campaign for the new office		Computer	
COMMITTEE NAME (A candidate's committee must include	the candidate's last name in the name of		
IMPORTANT: Indicate type of committee you are reporting for:			
( 1_Statewide/Legislative/Judge Standing for Potentian Condition 10.00)			
(5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (40) School Board or Other Political Subdivision PAC (11) Local Political Subdivision Candidate (8) County PAC (9) City PAC			
(11) Escal Bariot issue (including committee involved in multiple city/county ballot issues)			
Name 1 1	COMMITTEE CHAIR (manda	story except for a c	andidate's committee)
Mailing Address + OLS - Aug 54	Bruce Lea	· C	
41/201157.	Mailing Address 3531	Idle wood	St.
JOUXCAY +A 51104	City, State ↓ ↓ Zip Code ↓ ★	51104	
Phone (712) 222 - 1429	Phone (712 277-4	1989	
e-Mail KTBEAUVAK @ Cable ONE , NET e-Mail			
Comment of description.	Advocate for/against candidate(s)	vocate for ballot issu	ie(s)
All Candidates Enter: County Suparusor	County/Local Candidates ar	vocate against ballo	nmittees Enter:
Political Party (if applicable) Democratic	County: WOOBU	24	
District:			
Year Standing for Election: 2008 Date of Election: 11/04/08			
Bank Account Name	Candidate name & Address or Pa	rent Entity (PACs.	if applicable).
Sink P Cini	→ ↓ ↓	filiate, or Sponsor	·
mith for supervisor	Jacky Smi	<b>Y</b> N	
Name of Financial Institution/type of Account	Mailing Address ↓ ↓	· · · · · · · · · · · · · · · · · · ·	
PIONEER BANK CHECKING	2324 Mohac	ナクナ	
Mailing Address ↓ ↓	City 1	State ↓ ↓	Zip ↓ ↓
701 Pience St. 3	SIMIX (The I	A 5	7104
City ↓ ↓ State ↓ Zip ↓ ↓	Phone (712) 239 - 4	1981	11101
Draw Chey +A 51101	e-Mail JASMITHY35	PCAHO OUD.	Nat
STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:			
1. The committee and all persons connected with the committee understand that they are subject to the laws in lowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the lowa Administrative Code.			
2. That lowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.			
<ol> <li>That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require materials except for those items exempted by statute or rule. A committee that does not intend to cross the \$750 filing threshold shall file the Form DR-SFA for</li> </ol>	the placement of the words "paid for by" and t wishes to register a committee name for pu form in lieu of filing this form	I the name of the com rposes of using the s	nmittee on all political horter "paid for by" and
4. That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibitthe receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.			
5. A candidate and a candidate's committee may only expend campaign funds as permitted by lowa code sections 68A.301 through 68A.303 and rule 351—4.25.			
6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (PR-3) has been filed			
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Secretario of Treasurer	03/26	1/08	
Secreture of Treasurer	03/20	page Signed	

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